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MISSIONARY HEROES COURSE

LIFE STORIES OF GREAT MISSIONARIES FOR
TEEN AGE BOYS

ARRANGED IN PROGRAMS

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David W. Torrance

Medical Missionary in Galilee

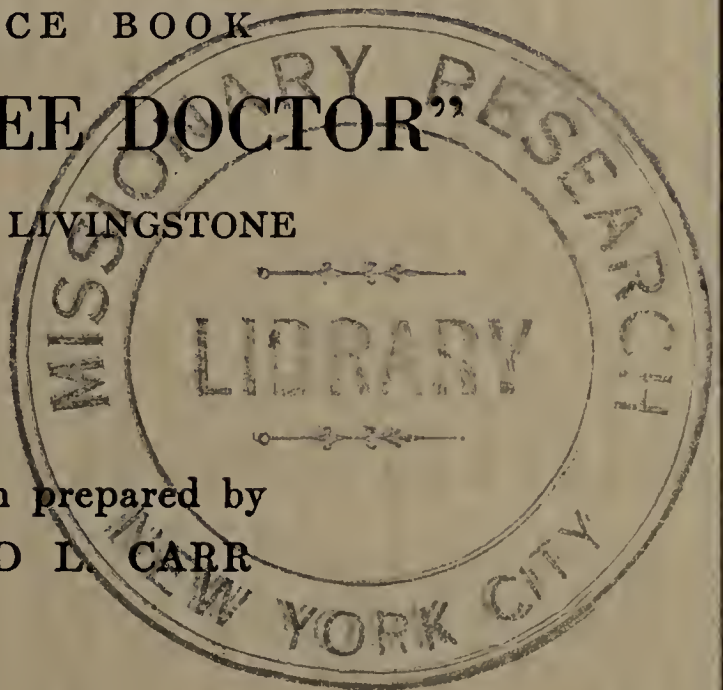
1862 -
1923

SOURCE BOOK

"A GALILEE DOCTOR"

By W. P. LIVINGSTONE

Program prepared by
FLOYD L. CARR



BAPTIST BOARD OF EDUCATION
DEPARTMENT OF MISSIONARY EDUCATION
276 FIFTH AVENUE, NEW YORK CITY

DAVID W. TORRANCE
Medical Missionary in Galilee

S O U R C E B O O K

“A GALILEE DOCTOR”

By W. P. LIVINGSTONE •

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Program based upon "A GALILEE DOCTOR"

by W. P. LIVINGSTONE

Doubleday, Doran and Company, Inc.

FOREWORD

THE *Missionary Heroes Course* for Boys meets a real need. It is a series of missionary programs for boys based on great biographies which every boy should know. Courses Number One, Two and Three are now available, each providing programs for twelve months, which may be used in the monthly meetings of boys' groups. Other courses are in preparation and will be issued for subsequent years.

It is suggested that the leader purchase two copies of each booklet; one to be kept for reference and the other to be cut up to provide each boy with his assigned part. Some may prefer to purchase one booklet and typewrite the parts for assignment. In order to tie together the life incidents as they are presented by the boys, the leader should master the facts outlined in the biographical sketch and read carefully the volume upon which the program is based. These volumes are missionary classics and may be made the basis of a worthwhile library of Christian adventure.

Boys are keenly interested in stories of adventure and achievement and it is hoped that participation in the programs will lead many of the boys to read these great missionary biographies. Attention is called to the thirty-five other life-story programs now available for Courses Number One, Two and Three, listed on the last page. The books upon which these programs are based may be loaned through public libraries or purchased from the American Baptist Publication Society and other book-selling agencies.

Portraits of these missionary heroes are also available for purchase at fifteen cents a copy or \$1.50 for each set of twelve.

While these programs have been developed to meet the needs of boys' organizations of all types—i. e., Organized Classes, Boy Scouts, Knights of King Arthur, etc.—they were especially prepared for the *Royal Ambassadors*, a world outlook organization for 'teen age boys originating in the southland and since adapted to the needs of the Northern Baptist boys by the Department of Missionary Education. We commend these materials to all lovers of boys.

WILLIAM A. HILL.

PROGRAM FOR MEETING

1. Scripture Reading: John 9:18-25. Verse 25, reading, "Whether he be a sinner or no, I know not; one thing I know, that whereas I was blind, now I see," is illustrated in the instance of the old man to whom Dr. Torrance gave restored sight at Magdala, on the shores of Lake Galilee. The amazed man made the same reply to the eager questions of his fellow-townsmen. (See "A Doctor in Galilee" by W. P. Livingstone, page 111, or the story reprinted in this booklet, item number ten in this program.)
2. Prayer.
3. Hymn: "We May Not Climb the Heavenly Steeps." Stanza two, beginning:
 "The healing of the seamless dress
 Is by our beds of pain"
tells the story of the nearly four decades of faithful ministry rendered to the needy of Palestine and Arabia on the shores of Lake Galilee. (See pages 87-90, 125-127, 144-145, 216-217, 275-276 of "A Doctor of Galilee" by W. P. Livingstone, reprinted in selections listed under eleven and fourteen of this program.)
4. Introduction to the Life Story* (based on the brief sketch in this booklet).
5. His Bent Toward Medicine. (Pages 11-12, 12-13, 14-15 of the above book.)
6. The Die is Cast. (Pages 28-29, 32-34.)
7. Meeting with Opposition. (Pages 54-56.)
8. His Message and Ministry. (Pages 87-90.)
9. Securing Land for a Hospital. (Pages 93-96.)
10. Extending His Field of Service. (Pages 110-111.)
11. The Need for a Building. (Pages 125-127, 144-145.)
12. The Ultimate Objective. (Pages 173-174.)
13. An Epidemic of Cholera. (Pages 186-187, 189-190, 191-192.)
14. "Carrying On." (Pages 216-217, 224, 275-276.)

*The leader should master the brief summary given in this booklet and read, if possible, the book, "A Galilee Doctor," by W. P. Livingstone, upon which this program is based.

SKETCH OF THE LIFE OF DAVID W. TORRANCE.

David W. Torrance, destined to be the first Christian physician to heal and teach on the shores of Lake Galilee, was born in Airdrie, Scotland. His father was a physician and his grandfather the minister of the Kirk at Airdrie, and the mantle of both rested upon him as he later became a medical missionary. His father died when he was sixteen, so that his mother exerted the major influence in his life. He said in fact: "She it was who made me a Christian."

Shortly after his father's death, the family moved to Glasgow and David entered Glasgow University to prepare himself in medicine. A position in the Public Dispensary defrayed his expenses and gave him valuable experience. At twenty he passed his final examinations, a year below the minimum graduating age. In 1884 he served as one of a commission of four sent out by the General Assembly to visit the Holy Land and to report on the desirability of establishing a medical mission. Concerning Tiberias, on Lake Galilee, he said: "If one wishes to alleviate misery and sow happiness in the world, this is the place for him."

Having accepted the call of the Jewish Mission Committee to head the Sea of Galilee Mission, he sailed for Palestine on December 2, 1884, on a crusade of love and service. A year passed in language work at Nazareth and Damascus, but by the end of 1885 he was established at Tiberias. He found the city without a water or sewer system and seriously overcrowded. The Moslem, Jewish and Greek Christian forces were mutually antagonistic but united in opposition to the newcomer. The 3,500 Jews in the city were mostly poor and supported by the international Jewish Relief Fund. The Jews were difficult to reach as the Rabbis administered the "Khalukah." To meet this situation, the disciple of the Great Physician called into play reason, service and love, but especially love.

Dr. Torrance rented temporary quarters and began not only at his "dispensary" but also in their homes to treat the sick and afflicted. Other than a nominal fee for medicine, the service was rendered without charge. So skilful was the Doctor that a steady stream of patients not only from Tiberias but also from distant cities and the great desert, poured into the crowded quarters. The rabbis issued "bans" and even withheld the Jewish aid in their

efforts to cripple his work, but he wrote home: "I am thankful that the Committee chose me to labor in Tiberias. I am full of hope about the future. . . . The work is very hard and so is the field, but we keep pegging away." In the year 1886, 647 patients were treated, of whom 539 were Jews.

From the first he frankly declared his purpose to witness for Jesus Christ. Each day, before examining the waiting patients, he conducted a brief gospel service, saying decisively: "I am not going to bribe you with free treatment and I must hold the little service, as my religion tells me to do. I am not sailing under any false colors." His Moslem and Jewish patients endured the service for the sake of his skilful care. Even sheikhs from the desert came from great distances. A sheikh whom he had healed said, as he faced the Doctor's message, "Mohammed was a prophet but he was not like Christ."

Under his wise generalship the work was steadily developed. A girl's school was opened at Tiberias and another at Safed, five hours' ride on the heights above the lake. An evangelistic worker was secured to stand by the side of the Doctor. A sailing boat, the "Clyde," was sent from Scotland, to give access to the region about the Lake of Galilee. His sister came from Glasgow to assist him in the work. In 1894, nearly ten years after the mission was founded, he had the joy, on January 1st, of dedicating a substantial hospital building. It stands on high ground, commanding a superb view of the lake, so pivotal in the ministry of Jesus. The hospital has a capacity of twenty-four beds and has become a beacon light not only to all Palestine but to the desert country across the Jordan River.

The following year the workers rejoiced in the baptism of the first convert, James Cohen by name. Overcoming the barriers of bigotry and bitterness, the latter by reason of the persecution of the centuries, he courageously took his stand. He was baptized on February 10, 1895, a high day in the history of the Galilee Mission. He developed an admirable Christian character, attained to great spiritual power and for years served as an efficient colporter, even winning in time the goodwill of his own people.

The shadows gathered, however, in 1895 when the wife of Dr. Torrance died, leaving two children. Greatly shaken by his loss, he returned to Scotland for a furlough, long overdue. He was in great demand in the homeland as a speaker and presented the story of the work in the churches and before the General Assembly. He could now point with pride to the three substantial buildings at Tiberias and the developing work at Safed. He termed the mission a "revelation of Christian love in a loveless land" and pled

for funds to develop industrial and agricultural work in order to make the converts economically independent in the social order.

A year after his return to Tiberias, he married the head nurse on the hospital staff, Miss Eleanor A. Durie, and the hospitality and ministry of the Doctor's home, extended to the unending procession of tourists and the influential civic and religious leaders, were resumed.

In 1902, cholera lifted, like a dragon, its dreadful head in Palestine and on October 24, broke out in Tiberias. The city government was hopelessly inefficient and the responsibility for coping with the situation came wholly upon Dr. Torrance. The Jewish Ghetto, with its poverty and congestion, became a veritable morgue. Over six hundred died, more than a tenth of the population of the city. The Doctor labored under a terrific strain and in the midst of his heroic efforts, his own wife was stricken and died. The community recognized its obligation to Dr. Torrance and the prestige of the Mission was greatly enhanced. The poise and devotion of the staff of Christian workers made a profound impression upon the terror-stricken city.

The outbreak of the World War in 1914 found Palestine to be one of the storm centers. The British workers were obliged to withdraw and Dr. Torrance volunteered for Red Cross service. The Mission buildings were commandeered by the Turkish government and the work interrupted for five years. But in 1919 Dr. Torrance was back in Tiberias, taking possession of the buildings and reorganizing the work. His son Herbert joined the hospital staff as his co-worker and the "Crusade of Compassion" continued in its peaceful conquest of the Holy Land. Dr. Torrance, termed "the most beloved man in Palestine" and the trusted friend of Jews, Moslems and Christians, was called home August 26, 1923, having given nearly four decades in service—

"By the shores of the beautiful sea."

INCIDENTS IN THE LIFE OF DAVID W. TORRANCE

Reprinted from "A Galilee Doctor"

by W. P. Livingstone

*By permission of the publishers, Doubleday, Doran and Co., Inc.,
New York*

His Bent Toward Medicine. (Pages 11-12, 12-13, 14-15 of the above book.)

His son, Thomas Torrance (the father of our Hero) was born at Airdrie, Lanark, Scotland, in 1809, and studied medicine at the Universities of St. Andrews and Glasgow. After graduating, he set up in practice in Graham Street in his native town, and there David Watt Torrance was born on November 6th, 1862, one of the youngest of a large family. . . .

Dr. Torrance was a skilful surgeon and oculist, and his kind and sympathetic manner made him popular both among his townsmen and the colliers in the neighborhood. He entered largely into the public life of the town, was a Justice of the Peace, and for a time Town Councilor and Burgh Treasurer, and became an enthusiastic Freemason. A series of lectures on health which he organized gave rise to the Mechanics' Institute, of which he was the first president. In 1859 he joined the Rifle Volunteers and was later made Assistant Surgeon to the battalion. He was an elder in Broomknoll Church, of which his father had been minister, but Mrs. Torrance went to the Free West Church and the children accompanied her there. Holding numerous professional offices, the Doctor was one of the busiest of men and could not spare time to attend to the indoor training of the children but he encouraged and guided their recreation, teaching them to fly kites, play cricket and football, and ride; and later supplied them with gymnasium equipment. One of David's earliest recollections was of being placed on his father's pony. From the first he was a lover of the open and of all outdoor pursuits. . . .

The love of medicine was in the boy's blood, and there was never any doubt as to his career. As a child he delighted to rise early in order to light his father's fire and do little tasks for him. He carried court-plaster in his pocket, and if any accident occurred, he was usually first on the spot. One Sunday, word came to the surgery that some excursionists had been precipitated over a bridge, two miles out, and that a number had been injured and two horses killed. David was due at the Sunday school but he started out instantly for the scene, and knowing all the short cuts across the fields, was there before his father, who was astonished

to find him assisting the victims. On another occasion, when a railway collision occurred, he was in the thick of the confusion helping the doctors. They all knew him as "Torrance's boy," and would pick him up on their way to a case. It was a bitter grief to him that when he was down with measles, Mr. Jackson, the minister of the Free West Church, died suddenly in the pulpit and he was not there to see! Ere he reached his teens he was assisting his father in the dispensary, and was present at post-mortem examinations. With the daring of youth, he sometimes thought the work of the doctors was clumsily done. He was, however, somewhat humiliated once when a play was being given in connection with the school. His part was that of a doctor. When he was examining the pulse of the patient, he lifted the wrong hand, whereupon the visiting teacher of elocution, Mr. Moffat (father of the well-known dramatist), exclaimed, "Dear me, boy; *you* will never be a doctor."

The Die is Cast. (Pages 28-29, 32-34.)

They visited the coast, inspected Haifa and Acre, and turned inland over a little-frequented road to Safed. One evening they arrived at a little old-world village, where they found a number of peasant Jews who could scarcely be distinguished from the ordinary fellahin. They were received by the sheikh, who provided them with accommodation.

It was soon noised abroad that "English doctors" had arrived, and, towards sunset, came the sick and suffering, the halt and blind, the deaf and dumb—an eager crowd hastening along the streets and over the flat roofs, and filling the little apartment and the precincts of the building. The doctors first cleared the room, allowing only the Jewish rabbi and two Greek priests to remain, and then attended to the patients. "It was like the story of Christ," said Dr. Torrance. "We could not put our hands on them as He did, but we did what we could." To him the scene was an extraordinary demonstration of the need for medical missions. "If this is a sample of what prevails, there must be a tremendous mass of sickness and suffering in the land." It was the first incident that had touched his professional sympathy, and it made a profound impression on his imagination. . . .

The Church quietly and confidently accepted the call to the work, and on the Jewish night of the General Assembly, the "Sea of Galilee Medical Mission" was inaugurated.

The Committee, however, had not yet secured their missionary. They had been pressing Torrance to accept the appointment and he had been reading up the subject of missions to the Jews and

studying the general Jewish situation. But he was still undecided and was undergoing an experience which comes to most men in their lives. He was enduring his temptation in the wilderness. There was strong family opposition to the Palestine plan, which meant burying himself in obscurity, and he was urged to employ his exceptional ability in a sphere where it would be recognized and adequately rewarded. His own inclination was to do this; he was conscious of lacking professional knowledge and experience; he desired to study in the medical schools of the Continent; he had the natural ambition to make the utmost of whatever gifts he possessed, and he felt within him the power to achieve success and fame. So, from the high mountain of his imagination, he saw the Kingdom that might be his and the glory of it.

On the other hand, he had seen Palestine; and, worn-out and burnt-up land though it was, it possessed in its very loneliness and desolation a quality of beauty and a fascination which drew him like a spell. Greater than the appeal of the country, however, was that of its people with their untended ills and hopeless suffering. He felt that the poorer and more degraded they were, the greater was their need of healing and love. He thought, too, of the honor of being the first Christian physician to walk in the footsteps of Jesus around the Galilean Lake, and of the possibility of building the first Christian hospital on its shore.

The matter was not long in doubt: he surrendered to the higher service and signified his choice. He was appointed to Tiberias in June 1884, and, completing his term at the Infirmary, he sailed on December 2nd from Liverpool.

Meeting with Opposition. (Pages 54-56.)

There was more than the touch of the physician in his ministrations. He read and spoke of One who was the healer of souls, and many, listening to his broken Arabic, seemed to obtain a glimpse of something beautiful and appealing. Others, orthodox Jews, were startled and put their fingers into their ears that they might not hear what he said. Their talk of the matter reached the rabbis. They, too, were startled. Then the hakim was also a Christian missionary! The satisfaction with which they regarded his presence turned sour; suspicion and resentment took the place of their former cordiality; they wanted no proselytizer in their midst to steal the people from the faith, and orders were issued that he should be boycotted and driven from the town. In a Jewish paper published in Jerusalem, a notice was inserted asking a physician of their own race to settle in Tiberias. The number of Jewish patients fell off.

But it was hard for the sick and their friends to watch Moslems and Christians pass into the courtyard and know that healing was within reach and yet be debarred from taking advantage of it. One of the special traits of the Jews is their love for their children and rather than see the little ones suffer, many a mother dared the wrath of the rabbis. Again and again the door of the waiting-room was burst open and a distracted woman rushed in, crying: "Doctor, my child! my child!" The Doctor could never resist such an appeal, and letting other matters stand, he would accompany the parent to her home and attend to the patient. This happened so often that it became difficult for him to meet all the calls, but by and by there was no need, for it broke the boycott.

Then the terrors of ecclesiastical law were evoked against the delinquents; solemn kherems, literally "bans," were pronounced in connection with the dispensary, and for a time these dread anathemas did their work. But love again conquered fear, and first children and then adults crept along the dark alleys to consult the doctor. The hearts of women grew soft towards him, because of his tenderness and skill; they gathered about him with their little ones, as the women of old gathered about Jesus, and began to speak of him amongst themselves as "Our David." One day, when out riding, his horse slipped, and he was thrown into a large cavity; a number of Jewesses who witnessed the accident rushed to his assistance, exhibited the utmost concern and treated him in the kindest way. It was a trifling incident, but it indicated the place he was taking in their regard.

The watchful rabbis then unsheathed their most potent weapon. From all who disobeyed, the khalukah (free aid) was withheld. The grim alternative was starvation, and this was worse than sickness. Again the dispensary was deserted by the Jews. With unflinching patience and good humor the Doctor met the situation; he had the more time to visit people in their homes and become acquainted with their family life and the conditions in which they lived.

His Message and Ministry. (Pages 87-90.)

Shortly after sunrise patients would begin to appear, often fighting to obtain early admittance, and by nine o'clock the leewan—which had been turned into a waiting-room—was crowded as well as the courtyard outside and all other available space. To all a numbered paper was given, on which was written their name and age, space being left for the prescription and notes of the case. This, which they retained, served as a ticket of admission so long as it was kept clean.

When the Doctor came on the scene, he read a few verses from the Bible and gave a short address. This was the feature of attendance which all classes found most unpalatable. But the Doctor made it known that it was an essential part of his work and that all who objected to it could stay away. "I am not going to bribe you with free treatment," he said, "and I must hold the little service, as my religion tells me to do, and you can come or not as you like. I am not sailing under any false colors." They liked his straightforward candor, and the majority soon became accustomed to the process of running the gauntlet, while the others who still objected called him in to their homes.

In some ways it was a difficult service. The Doctor spoke simply and clearly, often pausing to ask if they understood, and his illustrations were always taken from the everyday scenes with which they were familiar. But he had the consciousness that he was working against time. Here were from forty to a hundred restless patients, many of them suffering, and their minds occupied with their bodily condition; some believed he was talking blasphemy, others could not understand what he was saying. He would often be interrupted: "Oh, Doctor, don't be long," a woman would cry out; or: "Oh, Doctor, when will you be done? I have an awful pain inside!" Occasionally a tall Arab from the desert spaces would rise and stretch himself, wrap his loose cloak about him, and stroll outside and, after a mouthful or two of fresh air, stroll leisurely in again. All were obviously relieved when he finished. Yet he was there to teach the good news from God, and no better opportunity was to his hand. That the service was not unprofitable he often learnt in the town, where his addresses created interest and were discussed in workshop and market. He found also that the Jews who passed through the waiting-room became less prejudiced and were readier than their fellows to enter into religious conversation. . . .

The majority of patients suffered from medical ailments but there was a large number of minor operations and not a few surgical cases had to be performed under the disadvantage of inadequate accommodation and equipment. Very common were wounds and broken bones—the result of highway robbery and assault in the neighborhood, which sometimes proved fatal. Remarkable cures were effected which made the Doctor thankfully exclaim, "God answers prayer." There was, for instance, a case of a young boy, the grandson of an Arab chief, who, after a severe operation, recovered in two days. Such was a miracle in the eyes of the people and, being noised abroad, increased the stream of patients. He began to be accounted a magician, and he mingled trembling with his gratitude, for let a few deaths occur and his reputation

would be gone; he would be hounded out of the town, and all prospect of mission work would be at an end. But no fatalities occurred and his position was strengthened week by week.

Securing Land for a Hospital. (Pages 93-96.)

Only one spot seemed suitable for the purpose (a hospital). On the north side of the town the ground rose and, where it adjoined the boundary and immediately below the ruined pile of the Crusaders' castle, there was some waste land with a couple of ruined rooms and a single olive tree. Although a fine site, and commanding a view of the Lake, no one would live on it, probably because of its rocky character and its contiguity to the open country. It belonged to the mufti, who was the local religious head of the Moslems and their official representative in all relations with the Government, a well-educated man of charming manners. The Doctor had coveted this piece of ground from the time of his arrival, but he was careful to avoid mentioning the fact, especially to the mufti, who often visited him, for to have done so would have been to lose it. His patience was rewarded. One day the mufti began to talk of the land, and offered to sell it to the Doctor.

"Come and have a look at it," he said.

The Doctor, seemingly indifferent, accompanied him to the spot.

"What is your price?" he asked.

"Seventy-five napoleons."

"What about that piece down where the palms are?" indicating another plot on the edge of the beach.

"I will sell that too for another seventy-five."

"Ah, well, I'll think about it," said the Doctor, repressing his eagerness. He allowed two or three days to pass. Although he had no authority from the Jewish Mission Committee to purchase, the matter was too important to admit of delay, and feeling sure that his action would be endorsed, he went to the mufti and agreed to take both, half the amount to be paid down, and the other half within a month, on the understanding that the official registration, giving validity to the Moslem deed would be to hand by that time. The Registration Officer stated that the matter would have to be referred to higher departments at Acre. This was done but no answer came. The Doctor knew that bakhshish was expected but he had set his face against the practice and resolved to stand firm. The month passed; he paid the money and took possession, the mufti honorably fulfilling his part of the contract. Then the Doctor received an anonymous letter which said that if he would come with £50 to the registration office he would receive his title. This

was evidently written by an underling with the connivance of his superior officer, both of whom would share the amount.

The Doctor's Scottish blood was roused. He travelled to Beyrout, the seat of the wilayet under which Tiberias was administered, saw the Vice-Consul, and obtained an introduction to the Wali or chief government official, and to him told his story. The Wali shrugged his shoulders, no doubt asking himself why this troublesome hakim could not conform to the custom of the country.

"Well," he said aloud, "I will have to obtain authority from Constantinople. I will send a telegram."

The Doctor knew what kind of reply would be sent. There would be two: an open one, reading, "You must not trouble the British"; and a private one, saying, "Skin the wretched British." Time passed. He made repeated inquiries, but was always informed that no answer had arrived; and at last he said:

"Look here! I know your system, and I am quite willing to be reasonable and recompense obligations, but this is blackmail and I won't stand it."

"Go home, and I'll send another telegram and let you know," was the reply.

He returned to Tiberias uneasy as to the outcome. But Providence came to his aid. The Governor of the town became sick, called in the Doctor and was carefully tended and restored to health. In his gratitude he listened sympathetically to the representations of one or two of the Doctor's native friends, and the title was secured without the payment of a single piastre.

Extending His Field of Service. (Pages 110-111.)

Another gift to the mission was made through the efforts of Mr. J. R. Miller, a member of the Jewish Mission Committee, a sailing boat, called the *Clyde*, being subscribed for by the yachtsmen of the *Clyde*, while a punt named the *Kelvin* was added by a number of ladies in Glasgow and the west. The transport of both from Haifa to Tiberias on two wagons, each drawn by four horses, caused much excitement, the people turning out all along the route to inspect and discuss them. They became the talk of Tiberias because of their fine lines and finish, and there were crowds down to watch them being launched. It was November and heavy rains were falling, but in a fair interval the Doctor and Mr. Ewing rowed the *Kelvin* out, the little craft cutting the water in a way which excited the admiration of the spectators. The trial trip of the *Clyde*—flying a blue flag, worked by Mrs. Vartan—took place later, when the Doctor received a call from the Baths. A number of townspeople, including the Governor's daughters, accompanied him and all were delighted with the swift passage.

The *Clyde* became known as the Doctor's vessel, and there was no more welcome sight to the people along the shores of the Lake. The scenes reminded him of those connected with the ministry of Jesus. One day he sailed her to Magdala, and after addressing those who gathered around, he attended to their ailments. Down the hillside came a donkey bearing an old blind man suffering from senile cataract. He was led to the Doctor through the crowd of spectators, who laughed at the idea of a cure being effected. After some temporary treatment, the Doctor asked him to come to the dispensary at Tiberias, which he did. So successful was the operation that the patient found his own way back to his astonished friends. "What did he do to you?" they asked eagerly in the manner of the men of old. "How opened he your eyes?" And after the same manner he replied, "One thing only I know, that whereas I was blind now I see. . . . If this man were not of God he could do nothing."

The Need for a Building. (Pages 125-127, 144-145.)

One day a pale and emaciated Moslem woman with a diseased bone in her leg was carried in from a distant village. So offensive was the odor from the wound—it had been cauterized with red-hot irons, and was gangrenous—that the other patients protested, and put her out of the waiting-room. The Doctor entertained very little hope of her recovery but promised to see her every day and do what he could if she managed to secure a room in the town. She sought in vain; no one would receive her on account of the smell from the wound, and she was supposed to be dying. Even the khans and stables would give her no shelter. Carried on the back of her mother, she returned exhausted to the dispensary, and begged to be allowed to lie under the archway and die in peace. This was too much for the Doctor. A word to Moses, who was standing by, all sympathy, sent him off to the chief rabbi, who was then a patient, and he returned with the tidings that a little room and kitchen of his own could be rented for the purpose. Here an operation was performed, the diseased bone was removed, grafts of skin were placed over the wound, and the woman returned home singing the praises of the wonderful doctor who had brought her back to life. Her husband received her as one from the dead.

The room in which she had lain was about 16 feet square, and the Doctor divided it into three compartments and began his hospital—a Jewish woman, who spoke Arabic and the Yiddish jargon, acting as nurse, cook and cleaner. As many as eight patients would occupy it at a time, Jew, Moslem and Christian all associating together and forgetting for the once their differences of

thought and custom. They brought their own belongings and, when cured, took up their beds and walked.

In that little native house miracles of healing were effected. Three of the first patients were blind and they left with their sight restored. One of them, a Bedouin from the East, kissed the hand of the Doctor and said he would carry a white flag through the country and tell every one what God had done for him at Tiberias. The incident was so common that the Doctor forgot it but not long afterwards came a lamb from the desert as a gift from the man who had been blind and could now see. Another patient was a lame boy who came on crutches and was made to walk.

This embryo hospital the Doctor supported entirely out of the fees paid by the patients and by contributions from friends, but it was obvious that it was only a makeshift and would not long meet the needs of the situation. . . .

It was a happy day for the Doctor when he saw the hospital, which was to embody the spirit of the Great Healer of humanity, complete and ready for occupation. About the same time his own house, as large, commodious and airy as the clerical missionary's, was also finished. Both developments marked a notable advance in the history of the station. At last the missionaries were adequately housed in hygienic surroundings and at last the medical work would be carried on with something like comfort alike to doctor and patients.

The three massive structures formed the finest and most prominent objects around the Lake shore. They stood almost in line at a slight elevation; the first and lowest, next the town, was the hospital; that in the center was the Doctor's house; and the third, close to the boundary wall, was the manse of the clerical missionary. All were of stone, had flat roofs, front verandas and balconies, and marble floors and gave the impression of great strength combined with airy spaciousness. The ground sloped down to the shore-wall, but unfortunately the road leading out of the town cut the lower part in two, requiring the construction of two walls and two gates.

The Doctor's ideal was sixty beds, but practical considerations reduced the number to twenty-four and six cots, and it was a testimony to the interest felt in the Mission in Scotland that nearly all these found supporters at a cost of £20 per bed and £10 per cot per annum.

A few desperate cases were taken in some weeks before the building was finished, but the formal opening took place on January 1, 1894. It was a red-letter day in the history of Tiberias. The Doctor invited the officials and principal men of the town to

the function, which, he diplomatically intimated, was held "under the shadow of His Majesty the Sultan."

The Ultimate Objective. (Pages 173-174.)

The Doctor, it will be seen, never forgot that his principal aim was to win men and women to Christ. He would sail under no false colors and was fearless in carrying out his commission. Most of the sheikhs he visited knew well what his purpose was, but were disarmed by his brotherly qualities as well as by his skill. They would endeavor, however, to avoid the ordeal of visiting the Mission hospital and beg to be healed at once in their camps and villages. One old sheikh complained that he had some chest trouble and wished the Doctor to cure him then and there. "I cannot do anything now," the Doctor said, "but if you come to the dispensary at Tiberias I will gladly do what I can for you." The Arab insisted on immediate treatment. "Suppose now," replied the Doctor, "that I was riding along your pasture grounds and a shoe came off my horse's foot and you were not far off with your cattle and I rode up to you and asked you to put on the shoe, you would be willing to help me. But if I asked you to do it at once you would say, would you not, 'I have neither hammer nor nails here, but come along with me to my tent and I will do it for you'? I would never insist on your doing it on the spot, would I?" "No." "Well, you come to my dispensary at Tiberias." "And will you cure me if I do?" "Yes, if God wills." The Arab bowed low at the sacred name and said he would come, knowing full well that if he went, he would have to hear about the foreign religion and, who knows, might be disturbed in soul.

The hospital was still the chief evangelizing agency. Daily prayers were held by the nurses; the evangelist and Bible-woman moved about and read to the patients or spoke to them in a simple way; on Sunday mornings there was an Arabic service, conducted, as a rule, by the clerical missionary, for all the patients able to attend: they were taken or carried to the out-patients' hall, where they rested on rugs and pillows—and in the afternoon the Doctor held a service in the hospital. Every morning, after the workers had prayers together, a short service was held in the waiting-hall of the dispensary. This the Doctor conducted on Mondays, using the address he had given the previous day in the wards and on other days it was taken by his colleague or the evangelist. The latter afterwards spoke and read with those who were waiting their turn.

An Epidemic of Cholera. (Pages 186-187, 189-190, 191-192.)

The worst did come suddenly and violently. On October 24, 1902 he was called out to a case and diagnosed cholera. He notified the Government and a guard was stationed around the house. It was too late. Other cases occurred and panic seized the people. The Government went to pieces. Its only resource was the soldiery and these were placed outside the walls to act as a cordon. In their wild excitement the people endeavored to break through and were driven back and bottled up. They began to die like flies at the blast of winter. Strong men and women succumbed in a few hours. The bodies lay in the houses until the neighbors were compelled by the stench to remove them. For a time they were thrown outside the walls and left unburied.

The Doctor stopped the clinic and closed the hospital, retaining, however, the patients already there and devoted himself day and night to the work of relief. His figure, dressed in white overalls, was seen everywhere; he visited the stricken, succored the destitute, advised the officials on the measures to be taken. Mr. Soutar was at Safed and, feeling it to be his duty to be with his colleague, he came down with his family. The Doctor, fearing trouble with the cordon at Magdala, went out there to meet him. When Mr. Soutar approached, the soldiers raised their rifles and threatened to shoot if he came nearer. "If you do," ominously remarked the Doctor, lifting his own gun, "I also will shoot." It took some time to convince them that their real duty was to prevent affected people from leaving instead of keeping an unaffected individual from entering.

Mr. Soutar found that the Doctor was working at high pressure. "It would be difficult," he wrote, "to praise his work too highly. If only he were backed up by the Government, there would be hope of checking the disease." . . .

In the second week, a German from Haifa, who had been the contractor for the hospital, was taken ill. The Doctor fought for his life but he died twenty-four hours after he was attacked. That day Mrs. Torrance wrote to Miss Vartan at Nazareth: "We are well and are leaving ourselves in God's hands." Finishing the note, she went to the roof of the house and watched for her husband's return from the funeral of the German. He saw her standing there silhouetted against the sunset light. She came to meet him. "David," she said quietly, "I think I must have got it." He took her in his arms and carried her up to her room. A new nurse, Miss Johnstone, had managed to enter the town before the cordon was established and the Doctor and she nursed the patient. Noth-

ing that skill and thought and tenderness could do was left undone but after a day's suffering she died, and was laid to rest at sunset in the little corner cemetery. She was the only victim in the Mission compound and the only one throughout the epidemic who was buried in a coffin. . . .

The epidemic ceased as suddenly and mysteriously as it had come. In the course of a month the town had literally been decimated, 600 out of the 6,000 inhabitants having died, while 1,400 succumbed in the district around. There was scarcely a family which had not lost one or more members of its circle. A few of the infected escaped to Safed, but the disease did not spread in that lofty town. It travelled into Northern Syria, attacked Damascus and Aleppo and swept off a large proportion of the populations.

“During these trying weeks,” wrote Mr. Soutar, “the Doctor and his native assistant showed untiring devotion and rendered magnificent service. . . . It is not Torrance’s way to speak or write about his work. It was done as a matter of course, quietly, effectively, without self-glorification.”

“Carrying On.” (Pages 216-217, 224, 275-276.)

“The work is very hard, and so is the field, and one is apt to become engrossed in the dry detail of our daily duties but we keep pegging away.” So the Doctor summed up what was his yearly task. He was never satisfied with what he had achieved; he was always planning some development of the work; buying plots of ground to safeguard the amenity of the hospital, erecting new structures such as isolation rooms, wash-houses, and tanks, or improving the grounds. Now and again an epidemic would interrupt the regular work, as when small-pox occurred and carried off three hundred victims, or when dengue fever swept through the town and laid low every member of the Mission staff. The hospital was always full to overflowing and crowds of eager out-patients filled the dispensary hall. They were seen only on Mondays, Wednesdays and Fridays until 1 P. M.; minor operations and visits to patients in their homes occupied the afternoons; the alternate days were devoted to hospital cases and operations. The Doctor’s old cry of inability to cope with the tide of human ills was repeated again and again, and he would add, “Oh, for power to take advantage of such opportunities!” Once in an address to outgoing missionaries he had said: “Beware of taking too many patients. I have seen medical missionaries not having time to tell the patients to sit down and take off their coats. How can anyone, if he is taking more cases than he can attend to, do good work? If

the work is worth 'doing, it is worth doing well. No quack work in medical work." But when faced with the tragedy of suffering in the mass, when crowds of men and women appealed to him for relief, what course could he adopt? He had either to steel his heart and turn away or do what he could, however superficially, to ease their pain. He was too sympathetic to take the sterner course.

In January 1908 he was married to Miss E. W. Curtiss, daughter of Mr. and Mrs. Curtiss of Hartford, Connecticut, and a sister of a well-known American writer. It was a happy union and it made the tea-table corner of the veranda more attractive than ever to the American tourists who passed through in increasing numbers every spring. . . .

All this the Doctor had been pressing on the Committee, and it was satisfactory to have the situation realized and strongly presented to the Church in Scotland. In a more hopeful spirit, but, as he said, "dead tired," he left on a furlough. No sooner, however, was he home than he began itinerating and addressing meetings in the interests of the Mission. At the General Assembly, when Dr. Wells was Moderator, he gave one of the racy speeches which always fascinated his audiences. He told how, since he had first addressed the Assembly, a quarter of a million people had visited the out-patient department in Tiberias and that since the hospital had been opened, about 5,000 had been treated and had the Gospel preached to them. He intimated that he had quite a long list of "wants," at which there was laughter. "Oh," he said, "I have no fear of getting them! But I do wish that in connection with the extension scheme I could have a maternity hospital. I have seen such misery and distress that it has been laid on my heart to plead for it at this time." The result was a cheque for £1,000 from an appreciative listener towards a maternity department. . . .

In the afternoon comes the ward service in Arabic, conducted by the Doctor, the patients around him, some squatting on the spotless marble floor, others on forms and chairs or sitting up in their cots, men and women and children of many types—bedouin, fellahin, Jews and Jewesses—all quiet and patient, with eyes that never leave the Doctor's face. Now and again, in answer to a question, comes a general sigh or sign of acquiescence or a more emphatic response from some strong-minded individual. But what they are thinking, how they are being influenced—who can tell?

In the deeper hush of the night, when the moonlight lies upon the Lake, a nurse bends over an old Jew whose hours are run. The lights are low in the ward and all the patients are asleep, but with an effort he turns and glances furtively towards the

beds, and then looks up with a smile into the compassionate face of the girl. She knows and whispers the one word "Jesus." He nods, his lips move. "Yes, I am a Christian at heart and I am trusting in Jesus." Even as he speaks his breath and his spirit passes. . . .

Now, as of old, Jesus walks in Galilee, moving the hearts of the people and drawing them to Him and to peace of mind and body and to eternal rest.

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